•								Application or Docket Number,					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10771681"					
CLAIMS AS FILED - PART I								ILL E	NTITY	7 (OTHES	RTHAN	
(Column 1) (Column 2)							TYP			OF		ENTITY	
TOTAL CLAIMS			18				R.	ATE	FEE	7	RATE	FEE -	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			\5 minus 20=		•		X	X\$ 9=		OR	X\$18=		
 	EPENDENT CI		minus 3-				×	X43=		OR	X86≈	·	
MULTIPLE DEPENDENT CLAIM PRESENT						+1	45=		OR	÷290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	TAL		OR	TOTAL	779	
CLAIMS AS AMENDED - PART II							64		CNZIZV	-	OTHER		
	(Column 1) (Column 2) (Column 2) (Column 2) (Column 3)) [ALL	ENTITY	OR	SMALL	,	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MÓ	Total	•	Minus	**		·=	xs	9=		OR	X\$18=		
AME	Independent	•	Minus	***		=	X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+10	45=		OR	+290=		
								OTAL		1	TOTAL		
										OR,	ADDIT. FEE		
		(Column 1) CLAIMS		(Colun		(Column 3)	I		4001			4881	
T B		REMAINING AFTER		NUME PREVIO		PRESENT EXTRA	RATE		ADDI- TIONAL		RATE	ADDI- TIONAL	
VEN		AMENDMENT		PAID F					FEE		· ·	FEE	
AMENDMENT B	Total	•	Minus	**		= '	xs	9=		OR	X\$18=		
AME	Incependent	NTATION OF MU	Minus	ENDENT	CLAIM	•	X43=			OR	X86=		
					00		+14	15=		OR	+290=		
								OTAL	•	OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								FEE			AUUN. FEEI		
]	`		HIGHE	ST				ADDI-	ſ		ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE	
N N	Total	•	Minus	**		=	X\$	9=		OR	X\$18=		
ME	Independent	•	Minus	***		=	X4:	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									~~ 			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								5=		OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL OR ADDIT. FEE ADDIT. FEE													
		ber Previously Paid					r found in t	he app	ropriate box	in colu	ımn 1.		